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Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department RECEIVED

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OIL CONSERVATION DIVISION SEP 1 7 1991

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

O. C. D. ARTESIA CENIC

DISTRICT	Ш				
DISTRICT 1000 Rio I	3 ra 206	Rd.	Aztec.	NM	87410

DISTRICT II P.O. Drawer DD, Antesia, NM 88210

REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

•		10 ing	11401 C	THE OIL	AND WA	0, 1, (1, 0,						
Operator		7011			_			Well API No. 30-015-26738				
YATES PETROLEUM CORPORATION V								30-013-20736				
Address 105 South 4th St.,	Arteef	a. NM	8821	0								
leason(s) for Filing (Check proper box)	NI CCOI	4, 1111			Othe	r (Please expl	zin)					
New Well		Change in	Transpor	nter of:			•					
Recompletion	Oil		Dry Gar									
Change in Operator	Casinghe	_	Conden	_								
change of operator give name												
nd address of previous operator												
I. DESCRIPTION OF WELL	AND LE		.									
ease Name		Well No. Pool Name, Including Form			•	. 0			· ——			
Prickly Pear AIE Fed.	Com	11	Sou	th Dag	ger Draw	U/Penn	// P.	Pederal of Page	NM	27055		
ocation		_		_	. •	,	200		Foot			
Unit Letter P	_ :990)	. Feet Fro	om The	outh Lin	and	990 Fe	et From The	East	Line		
n 22 m 1	io 209	2	D	24E). N	ирм.		Eddy		County		
Section 23 Townsh	iip 203	<u> </u>	Range	246	, No	arm,				County		
II. DESIGNATION OF TRA	NSPORTI	ER OF O	IL AN	D NATUI	RAL GAS							
Name of Authorized Transporter of Oil	12(20)	or Conde			Address (Giv			copy of this form				
Amoco Pipeline Co		nder De	pt.	—	PO Box	702068	, Tulsa,	OK 74170)–2068			
lame of Authorized Transporter of Casi		[XX]	or Dry	Gas []	Address (Giv	e address so w	hich approved	copy of this form	is to be se	ni)		
Yates Petroleum Corpo	oration				105 Sou	ith 4th	St., Art	esia, NM	88210	· · · · · · · · · · · · · · · · · · ·		
If well produces oil or liquids,	Unit	Sec.				is gas actually connected? When ?						
ive location of tanks.	$ \frac{G}{G}$	23	20s	24e	Yes		1	9-3-91				
this production is commingled with the	t from any o	her lease or	pool, giv	e commingi	ing order num	ber:				······································		
V. COMPLETION DATA		Longe		7 11/-11	l Non Wall	l Wadrawa	l Danses	Dive Deak Ices	na Daghi	Diff Res'v		
Designate Type of Completion	1 - (X)	Oil Wel	, j (Jas Weli	New Well	Workover	Deepen	Plug Back Sar	iic Kes v	i kera		
Dute Spudded		npl. Ready t	o Prod.		Total Depth	l	- 	P.B.T.D.				
7-22-91		9-11-91				30'		8088'				
Elevations (DF, RKB, RT, GR, etc.)	Name of	Name of Producing Formation				Top Oil/Gas Pay			Tubing Depth			
3636¹ GR	Ca	Canyon				7591'			7800'			
Perforations								Depth Casing S				
7591-7773'								8130				
		TUBING	, CASI	NG AND	CEMENTI	NG RECO	SD					
HOLE SIZE	C	CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT				
26"		20"			40'			Redi-Mix Pol ID				
17½"		13-3/8"			292'			775 sx 9-12-9				
12 1 ''		9-5/8"			1218			900 sx 1mp + B				
8-3/4"		7"				8130'		1600 sx /				
V. TEST DATA AND REQU	EST FOR	ALLOW	ABLE		7/8" @ 7							
OIL WELL (Test must be after	recovery of	total volum	e of load	oil and mus					full 24 hou	rs.)		
Date First New Oil Run To Tank	Date of	l'est			Producing M	lethod (Flow, p		eic.)				
9-3-91	9	-11-91			<u> </u>	Pumpin	g	Choke Size				
Length of Test	Tubing i	ressure.			Casing Pres	aire		Choke Size				
24 hrs					Water - Bbl			Gas- MCF				
Actual Prod. During Test	Oil - Bb				1	52		187	6			
2094	4	42				<u> </u>		10,				
GAS WELL												
Actual Prod. Test - MCF/D	Length	of Test			Bbls. Cond	ensate/MMCF		Gravity of Con	densale			
					Carlos Day	mum (Chut in)		Choke Size				
Testing Method (pitot, back pr.)	Tubing	Tubing Pressure (Shut-in)				Casing Pressure (Shut-in)						
	!				_\							
VI. OPERATOR CERTIF	ICATE (OF COM	IPLIA	NCE	- []		MCED\	ATION D	11/191	ΩN.		
I hereby certify that the rules and re	gulations of	the Oil Com	servation		1	OIL CO	NOLITY	AHOND	IVION			
Division have been complied with a	and that the in	formation g	given abov	ve	-		. •	SEP 2 4 19	101			
is true and complete to the best of t	ny knowledge	e ama delief.			Dat	e Approv	ed	JEI 6 1 13	771			
. O . 9		_										
77.000	ellets				By.			SIGNED BY				
Juanita Goodlett	- Produ	action	Supvi	:.	-7	M	IKE WILL					
Printed Name			Title		Titl	e : \$	UPERVISO	OR, DISTRIC	I II			
9-13-91		$(505)^{-7}$						Tangsta a realization december				
Date		1	elephone	No.								

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.